

**ARLINGTON COMMUNITY SERVICES BOARD
MENTAL HEALTH CRIMINAL JUSTICE REVIEW COMMITTEE
MAY 2003 TO MAY 2008**

**“Celebrating five years of exciting developments in mental
health/criminal justice collaboration”**

Presented by Leslie Weisman, LCSW, Client Services Entry Supervisor, Behavioral
Healthcare Division and Winston Marcus, Director of Probation, Arlington Community
Corrections Unit

The committee began meeting in May 2003 with the following goals:

1. To review the current mental health and County jail system/processes.
2. To make recommendations for system improvements to more effectively divert, treat and monitor persons with mental illness who become involved in the system.
3. Create effective linkages for mentally ill persons as they leave the jail.
4. To implement recommendations.

Membership of the group has grown over the years to include representation from the following agencies or County departments: Arlington CSB (Executive Director chairs the meeting, others include Client Services Entry Supervisor, Forensic/Jail Diversion Team, Emergency Services Manager, Dual Diagnosis Program Manager), NAMI representatives, mental health consumer, housing (both Permanent Supported Housing director and Homeless Services Coordinator), Jail MH program staff, Sheriff's Department, Chief Magistrate, Public Defender's Office, Commonwealth Attorney's office, Arlington County Police Dept., Metropolitan Washington Transportation Authority Police (National Airport), Community Corrections, General District Court (judge).

The committee meets monthly for 1 ½ hours on the third Wednesday of each month. An agenda is sent out ahead of time with any related materials and minutes are distributed at each meeting.

YEAR ONE: MAY 2003 – APRIL 2004

First task was to outline the flow of SMI in the criminal justice system, particularly in our jurisdiction (see handout of diagram). We specifically looked at what happens to these individuals through the process, who is involved with them clinically and legally, what are the trouble spots in the system, and what is working well. This systems review became the foundation of all the work that has transpired over the past 5 years.

YEAR TWO: MAY 2004 – APRIL 2005

Accomplishments:

- ❖ Review/revision of Police Department “10-96 Subject Review Checklist.” This is a laminated small card with questions police can ask a person to determine if they may have a mental illness and what symptoms to look for to help with this determination.
- ❖ Began extensive study of non-violent mentally ill in the jail. Looked at police reports to evaluate decision process of police on arrest vs. mental health assessment.
- ❖ Met with local hospital personnel to improve the medical clearance process for consumers who are being TDO’d.
- ❖ Mental health staff began attending police roll calls to re-educate police on ECOs and TDOs; also for relationship building.
- ❖ Client Services Entry Supervisor and Emergency Services manager meeting monthly with a police liaison around all issues related to police and the mentally ill, particularly as it relates to Emergency Services.

Presenters:

- ❖ Chesterfield/Colonial Heights Community Corrections Day Reporting Center Dual Diagnosis Track
- ❖ Arlington County Sheriff’s Department Pre-Release Program
- ❖ Norfolk Mental Health Court

YEAR THREE: MAY 2005 – APRIL 2006

We began the year by reviewing the work of the committee and discussing possible next steps. We looked at the following issues:

1. What we had accomplished to that point.
2. What programming or agencies do we now work with who are addressing the issues of the SMI in the criminal justice system?
3. Where are the gaps in the system that we currently have.
4. Where are we going? How can we become better educated about different approaches and what others are doing to fill the gaps?
5. Arrange for continued presentations of programs which relate to our work. Evaluate these programs in relation to Arlington’s needs.
6. Evaluate whether or not our recommendations meet the following criteria: is there support for our recommendation from the community and the County Board and is there funding.
7. What needs to happen to make our recommendations a reality? Who else needs to be involved?

September 2005: we had determined four major areas where we could focus our efforts:

1. Intervention and diversion prior to incarceration;
2. Intervention and diversion after

incarceration; 3. Creation of Mental Health Court; 4. Creation of Forensic Case Management/Jail Diversion team. The committee voted most strongly for the creation of a Forensic Case Management/Jail Diversion team.

January 2006: a clinician at the CSB started a pilot jail diversion program working with the target population. A proposal was developed for the creation of two positions: a team leader and case manager for Forensic Case Mgmt/Jail Diversion. The Client Services Entry Supervisor, as future supervisor of this program, visited the Virginia Beach CSB Jail Diversion and Forensic Pre-Trial Services.

March 2006: we received our first notice of possible funding of this program.

July 2006: we received a grant for \$75,000 through the General Assembly for jail diversion. This allowed us to hire the manager of this program. We also received a grant of \$70,000 through the HPR II Western State Hospital Transformation Project to hire a jail discharge planner which became our jail diversion/forensic case manager.

Accomplishments:

- ❖ Emergency Services monitored individuals brought before the magistrate to evaluate volume of mentally ill facing arrest and how they present at arrest.

Presentations:

- ❖ Fairfax Jail Diversion Program

YEAR FOUR: MAY 2006 – APRIL 2007

August 2006: Senator Dick Hickman of the Senate Finance Committee was in Northern Virginia as part of his review of larger jails. He joined our August meeting.

November 2006: grant allocation formally allocated for two FTEs for Behavioral Healthcare Division to start new forensic program.

February 2007: hire of new jail diversion team leader and case manager. Outreach efforts began with courts, OAR, NAMI, local crisis stabilization program, Homeless Services Coordination Committee, Public Defender's Office, Commonwealth's Attorney, and other relevant stakeholders.

Accomplishments:

- ❖ Created "Citizens Guide to Mental Health Services," a pocket resource for police and other interested community members.

Presentations:

- ❖ New River Valley Diversion Program
- ❖ Alexandria Juvenile Detention Facility

YEAR FIVE: MAY 2007 – PRESENT

July 2007: the committee began development of a proposal for a Crisis Intervention Center (CIC). This center will include 24/7 Emergency Services, a police drop off center with CIT trained officers, and a 23 hour crisis stabilization program. This program is being developed in response to the current mental health climate in Virginia particularly following the Virginia Tech tragedy and in preparation for the new code changes. The CIC hopes to fill many of the gaps and meet the challenges which have been identified in our community through the work of our committee.

Several key areas were analyzed in order to support our proposal, i.e. number of mentally ill in the jail, average number of days SMI spend in the jail versus non-SMI, costs of incarceration, costs for psychotropic medications in the jail, Western State Hospital forensic admissions, Emergency Services data related to individuals who could benefit from a CIC, particularly for jail diversion.

Accomplishments:

- ❖ May 2007 – Presentation of NAMI-Northern Virginia award to the MHCJR Committee for furtherance of jail diversion in Northern Virginia
- ❖ August 2007 - Jail Diversion/Forensic Case Management team presented in Richmond with other jail diversion teams from around the Commonwealth to the Behavioral Healthcare Subcommittee of the Health Care Commission on our work.
- ❖ October 2007 - Jail Diversion/Forensic Case Management team presented their program at all police roll calls.
- ❖ October 2007 - Arlington CSB Executive Director met with Arlington County PD Chief of Police regarding the work of our committee and our future plans for a CIC.
- ❖ January 2008 - First Arlington CIT training for officers, Next training scheduled for June 2008.
- ❖ January 2008 – at the Arlington County, County Board New Year’s Day address, the Crisis Intervention Center was listed as one of four major initiatives for the coming year in the County’s 2008 Management Plan.
- ❖ March 2008 – developed ETO/TDO process for Arlington to improve transfer of inmates to WSH and CSH under emergency conditions.
- ❖ May 2008 – completed grant application for DOJ BJA Planning and Implementation grant to develop the R.O.C.C. Project (Restoration, Outreach and Community Connections). This project would help implement an extensive array of mental health groups and activities on our mental health unit at the jail.
- ❖ Completed extensive study of time spent by police with the mentally ill, arrest vs. mental health assessment.
- ❖ Study of 169.2 Restoration to Competency process in Arlington given our large number of inmates sent to WSH for evaluation.
- ❖ Presented “Hearing Voices” DVD to our committee and showed/discussed DVD of Jericho Project, a jail diversion program in Memphis.

Presentations:

- ❖ Western State Hospital Forensic Services
- ❖ Patty Griffin, Ph.D. of the TAPA Center for Jail Diversion and Mark Munetz, M.D. of Summit County, Ohio's Northeastern Ohio University came to spend a full day with us evaluating our jail diversion program and presenting to our committee on their Sequential Intercept Model and its formulation in Arlington.

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